Type of Inspection New 🗅 _____ Annual Follow-Up (Prev. Inspection Date) Complaint Courtesy D_____ Random

NCDA&CS, VETERINARY DIV ON **ANIMAL WELFARE SECTION** 1030 MAIL SERVICE CENTER, **RALEIGH, NC 27699-1030** PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR OUTDOOR 🗆 вотн 🗶



	ANIMAL W	ELFARE INS	PECTION	V
GPS Coordinate	es - N: 35 - 5	11174	w : 7	8 . 68779
LICENSE #: 10561 TYPE FACILITY: Animal St BUSINESS NAME: OWNER: West ADDRESS: 1377 (TELEPHONE: (919) 639	COMOTON CON	a tire. Tel	,	
VMO HEGIEL COUNTY Johnstun				
Number of Primary Enclosure	es	Animals Present:	Dogs	Cats
	Circle e	X" in each box, i ach item number if not applicable	r, if inadequ	ate.
STRUCTURE	SANI	TATION		SPECIAL ITEMS
Housing Facilities 1. Structure & Repair 2. Ventilation & Temp. 3. Lighting 4. Ceiling, Wall, Floors 5. Storage 6. Water Drainage	12. 点 13. 点 14. 逝 15. 逝 16. 逝 17.	Waste Disposal Odor Ceiling, Wall, Flo Primary Enclosur Equipment & Sup Washrooms, Sink Insect/Vermin Co Building & Groun	es oplies s, Basins ntrol	Records
Primary Enclosures 7. Structure & Repair 8. Space 9. Ventilation & Temp.	点 19. 点 20.	Adequate Feed/W Food Storage	ater	<u>Transportation</u> ★ 29. Care in Transit Discussed
₹ 9. Ventilation & Temp. 10. Adequate Shelter	点 21. <i>和</i> 22. 成 23.	Personnel Ratio of 1:10 pers animals if >4 in personnel enclosure or com Animals' Appeara	primary nmon area	Veterinary Care 30. Isolation Facility 31. No Signs of Illness/ Treated
APPROVED CON	DITIONALLY APPR	OVED DISA	PPROVED	Date: 7/3/51 Time 3:00
AW-2 Rev. 1/07 White=		Canary= Inspector	Owne	Pink= Owner

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